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TWENTIETH CENTURY SOLILA MOULD BOOK

THE
DENTISTS' SUPPLY COMPANY
OF NEW YORK

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THE TWENTIETH CENTURY SOLILA MOULD BOOK

Containing

Illustrations and Measurements of those Twentieth Century Solila and Dentsply Teeth for Vulcanite Plates

which are

Regularly Carded with Anatomical Bicuspids and Molars

together with

Illustrations and Measurements of Certain Popular Moulds Supplied in Partial Sets.

THE DENTISTS' SUPPLY COMPANY
OF NEW YORK

Manufacturers of Trubyte, Twentieth Century Solila and Dentsply Teeth, Facings and Crowns

220 West Forty-second Street, New York, N. Y., U. S. A.

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PREFACE
AND
IMPORTANT NOTICE

This Mould Book of Twentieth Century Solila Vulcanite Teeth presents illustrations and dimensions of the so-called "Regular Moulds," that is, those upper and lower moulds which have been found to compose the great majority of all tooth orders and which are regularly carded with anatomical bicuspids and molars, and also illustrations and dimensions of certain popular moulds which are supplied only in partial sets and are *not* carded with anatomical bicuspids and molars.

Other moulds in the Twentieth Century system which are rarely indicated are contained in an appendix to this Mould Book which may be had on request.

Convenience for the dentist was the prime motive for eliminating rarely used moulds from this book and concentrating on the 44 upper moulds and the 17 articulating lower moulds shown herein. The advantages are apparent—

The confusion inherent to selection from hundreds of moulds is avoided.

Selection is confined to a relatively small number of moulds which have been *proved* to be those indicated for the vast majority of cases.

Full sets with regularly carded anatomical bicuspids and molars and with articulating lowers may be obtained by simply ordering the upper anterior mould.

Any of these "Regular Moulds" can be obtained from practically all dealers in all shades without delay while very few dealers carry stocks of the unusual moulds and can get them only on special order to the factory.

Add to these distinct advantages resulting from the use of the "Regular" Twentieth Century Solila Moulds the fact that these moulds were not arbitrarily selected by the manufacturer but were segregated from all our moulds as having been the preference of thousands of dentists in every part of the country over many years. Thus they have been *proved* to be the moulds indicated

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for the vast majority of cases and adaptable to average conditions of practice.

When taken in conjunction with the moulds shown here which are supplied in partial sets only, the "Regular Moulds" will afford a complete system of artificial teeth.

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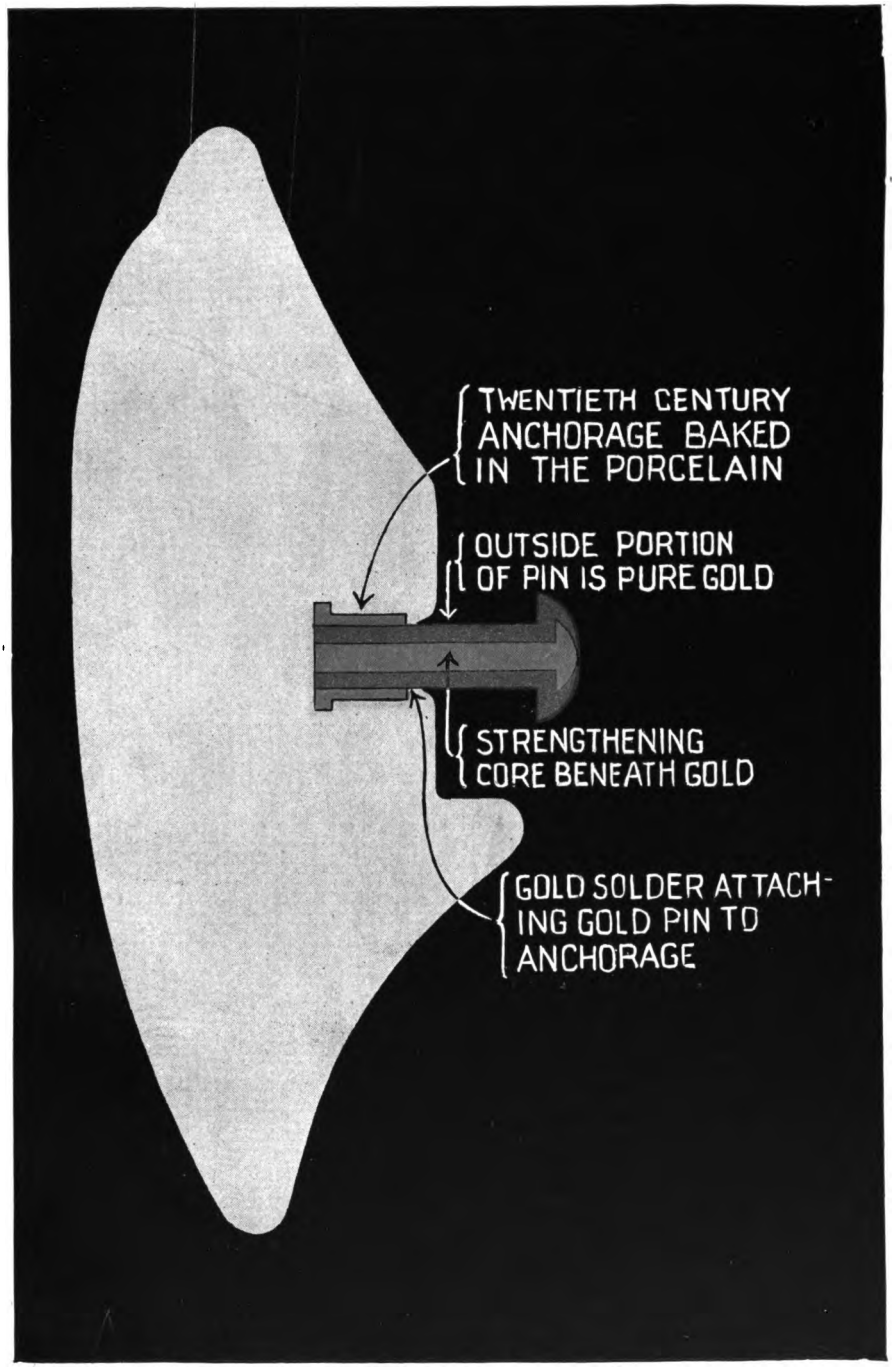

The Solila Gold-Clad Pin and The Twentieth Century Anchorage.

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FOREWORD

Since the publication of the Fourth Edition of The Twentieth Century Mould Book a great forward movement in prosthetic dentistry has become apparent and many changes in manufacturing conditions have developed.

A constantly growing demand for high quality in porcelain teeth has taxed our facilities for production to the utmost and the ever growing costs of production have necessitated some readjustments.

When it became apparent that the price of the popular Twentieth Century Teeth with soldered-in composition pins must be increased again, it was decided to devote the resources employed in their manufacture to the production of Twentieth Century Solila Teeth (with gold clad soldered-in pins) and discontinue Twentieth Century Teeth.

This change gave to the profession a product which possesses all of the excellent qualities of Twentieth Century Teeth with the added advantage of Gold Clad Pins, thus raising the quality and meeting the demand for a thoroughly dependable tooth at a medium price.

Dentists who feel that for some cases they cannot afford to use Trubyte Teeth, yet who can less afford to risk their reputations with inferior or unknown products, have in Twentieth Century Solila Teeth an alternative on which they can rely with confidence.

The present Mould Book is confined to information regarding teeth for vulcanite work. Mould Books covering our facing and crown moulds will follow and will be supplied on application to us.

THE DENTISTS' SUPPLY COMPANY,

220 West 42nd Street,

New York City.

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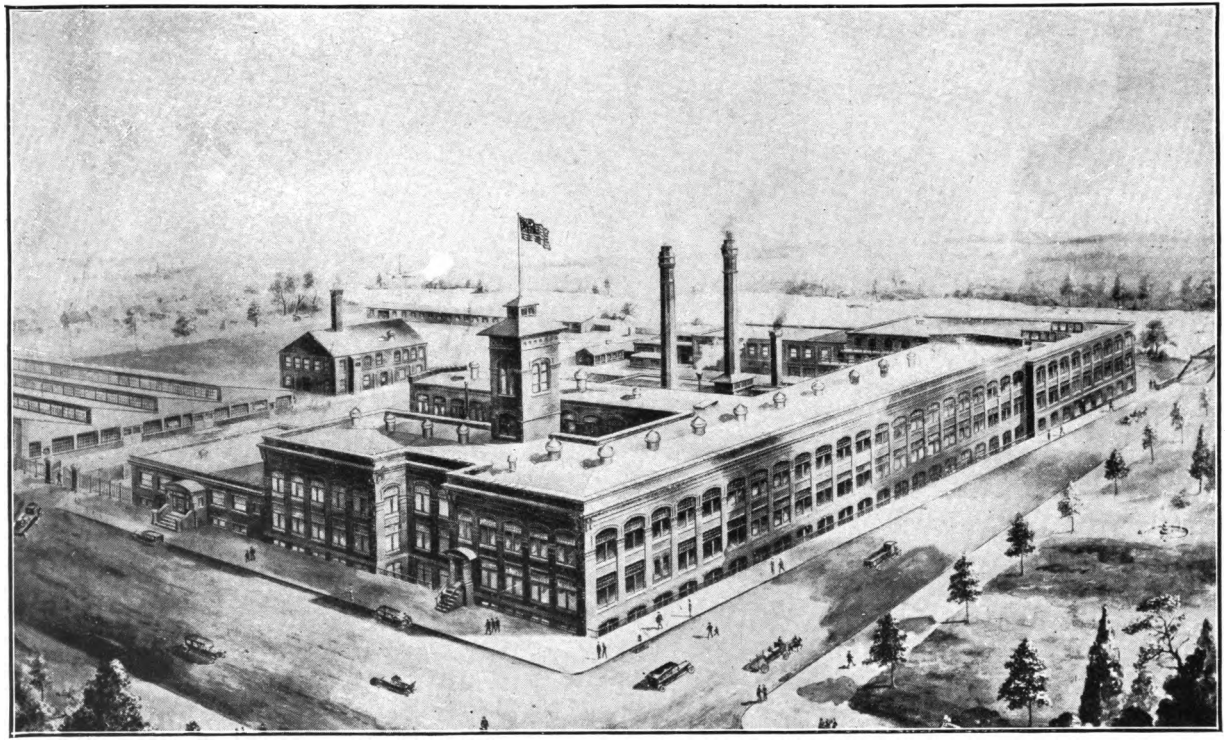

Factory of THE DENTISTS' SUPPLY COMPANY OF NEW YORK at York, Pa.

About 1,000 are employed. It is the largest factory in the world devoted exclusively to the manufacture of artificial teeth.

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THE TWENTIETH CENTURY PRINCIPLE IN TOOTH MAKING.

After twenty years of unprecedented success we believe that the Twentieth Century principle, as it is commonly called, is so well known as to need the briefest description.

The Twentieth Century principle proves that it is more scientific and efficient to solder in tooth pins than to bake them in. It is based on the fact that baking platinum pins into porcelain teeth cracks the porcelain, often to such an extent as to weaken the tooth; also on the fact that the baking of the porcelain to the pins unfits the tooth to oppose all its strength to the stress of mastication.

The Twentieth Century principle bakes the platinum into the tooth in the form of split ring anchorages, so that it cannot fracture the porcelain because the split ring anchorages "give" with the contracting porcelain in a way impossible for platinum pins to do. After the porcelain is baked, the pins are inserted into the openings in the center of the rings or anchorages and soldered there at a lower heat than the baking of the porcelain requires.

This eliminates the danger of checking the porcelain around the pins and insures the full strength of the porcelain being opposed to the stress of mastication when Twentieth Century Solila Teeth are used in denture work.

The pins of Twentieth Century Solila Teeth have a mechanical covering of 24 Karat gold over a nickel alloy core. The gold covering protects the strong nickel core from oral fluids and all other oxidizing agents and the result is the strongest tooth pins ever used in teeth for vulcanite work.

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One of the strongest arguments for gold clad, soldered-in pins, lies in the fact that, after sixteen years of experience in the production of artificial teeth, and with the freedom to choose any form of pin or method of attachment, the Twentieth Century principle and gold clad pins were chosen for our famous Trubyte Teeth, acknowledged by all to be the highest quality tooth product ever produced.

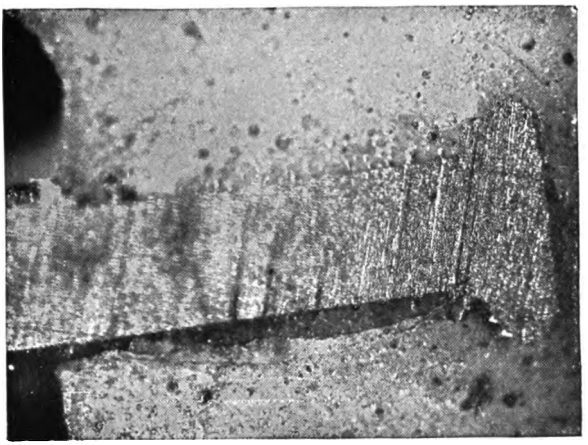

Fig. 1. Greatly enlarged section of a vulcanite tooth with baked-in platinum pin made in the days when platinum pins were large. Note how the porcelain is broken along the entire length of the pin embedded in the porcelain, greatly weakening the power of the tooth to withstand the stress of mastication.

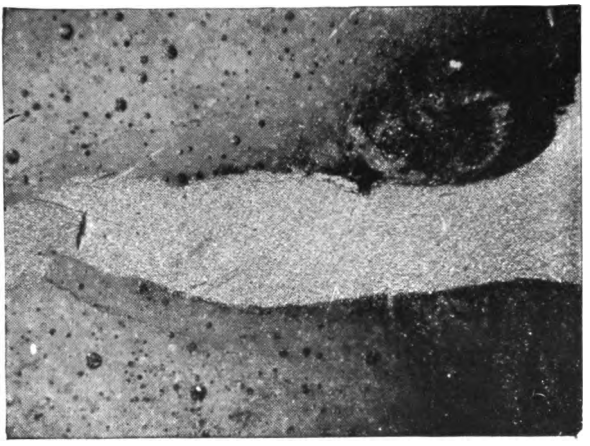

Fig. 2. Another section of an "old time" baked-in platinum pin vulcanite tooth with the porcelain shattered on both sides of the pin from the inside head to the surface of the tooth. The weakening effect of such breaks is self-evident.

In the early days of tooth making, platinum was used for pins for the following reasons:

1. It was the only metal which would endure the rather crude methods of tooth manufacture in vogue when it was selected.

2. Most of the porcelain teeth of that day, were soldered to metal plates. Platinum pins were necessary for the soldering process.

3. Platinum was cheap, and the pins could be large without increasing the cost of the teeth. It is now dear and the pins are smaller and weaker.

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Twentieth Century Solila Teeth

The Chemistry of the Mouth Played No Part.

Among those dentists who still prefer platinum pin teeth, the statement is common, "No metal other than platinum will withstand the oral fluids." This is incorrect because 24 Karat gold which covers the pins in Twentieth Century Solila and Trubyte Teeth is equally impervious to oral fluids. And they think that platinum

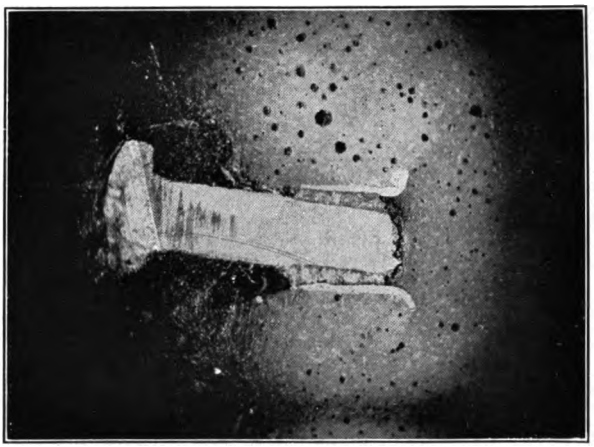

Fig. 3. Section of a Twentieth Century Solila tooth with pin soldered-in on Twentieth Century Principle. Note how perfectly the porcelain is fused about the split-ring anchorage and how perfectly the pin is soldered to the anchorage, enabling the tooth to oppose its full strength to the stresses of mastication. Compare the firmly set pin in this Twentieth Century Solila tooth with those illustrated on the opposite page and in Fig. 4.

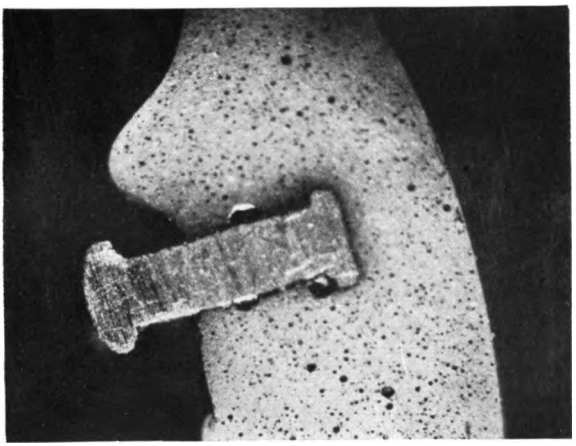

Fig. 4. Section of tooth with baked-in composition pin. Observe that the heat required to fuse the porcelain has oxidized the pin and gas bubbles are plainly visible. These pins have been so affected by the oxidation and other chemical changes which occurred during the baking that they have very little tensile strength.

was selected for tooth pins because of its resistance to the fluids. Such is not the case. The chemistry of the oral secretions was not nearly so well known then as it is today. There is no reason to suppose that any consideration of the oral fluids played the slightest part in the selection of platinum for tooth pins. This is all the more likely because the men who selected platinum were the manufacturers, and platinum was selected for manufacturing reasons.

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They would doubtless have been willing to select any other material which would have withstood equally well their manufacturing processes.

BAKED-IN COMPOSITION PIN TEETH.

When the success of the Twentieth Century principle was seen to be assured and seriously threatened the business of manufacturers of platinum pin teeth, several makers rushed into the market with teeth designed to stem the tide of Twentieth Century tooth success. These substitutes generally consisted of teeth with base metal pins baked into the porcelain. They were foredoomed to failure, because platinum is the only metal so far discovered which can be successfully baked into teeth of high fusing porcelain.

Those manufacturers who baked base metal pins into teeth of high fusing porcelain, found the pins so badly oxidized by the heat of baking, and by certain chemical changes which occur in the baking, as to have little tensile strength. However, the teeth were

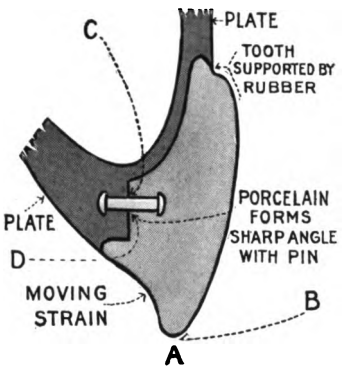

Fig. 5. Section of plate and a baked-in pin tooth, showing porcelain attached to pin. Strain from the lower teeth forces the tooth along the line A-B bringing force to bear first on the tiny right angles of the porcelain adjacent to the pin at C and D. The angle C, being small and incapable of bending or withstanding the strain, usually breaks, tearing the pin away from the porcelain at D and greatly weakening the tooth, which falls prey to some succeeding strains, perhaps when the patient is "eating soft bread."

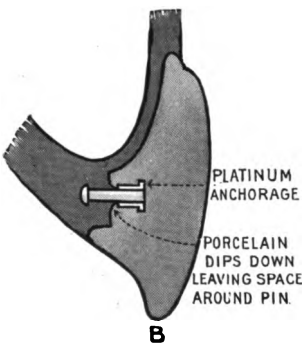

Fig. 6. Section of a plate and a Twentieth Century Solila Tooth showing how the porcelain dips down and is not in direct contact with the pin. The pin is nowhere attached directly to the porcelain but only to the anchorage. During the process of vulcanizing the little space about the pin is filled with vulcanite, forming a relatively soft cushion to ease off any strains to which the tooth may be subjected.

put on the market, but within a few years were discarded by those members of the profession who insisted upon serviceability in the teeth. Some manufacturers lowered the fusing points of their porcelain to where the pins could withstand the heat, and still make these teeth for dentists whose sole interest in teeth consists in buying them at the lowest possible price.

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How to Select Twentieth Century Solila Teeth.

The Twentieth Century Method of Tooth Selection, which is to be used in selecting Twentieth Century Solila Teeth, is based on the fact that it is comparatively easy to determine in advance the dimensions of the required teeth in millimeters. The teeth may then be most advantageously selected from tables in which the sizes of artificial teeth are recorded in millimeters.

Selection of vulcanite teeth for dentures may be divided into two parts, selection for appearance and selection for mechanical suitability.

Selection for Appearance.

Appearance in tooth selection has to do more especially with the anterior teeth and it is also appearance that largely determines the lengths and widths of the teeth, and the character of outline which will harmonize best with the patient's face. Such selection is made easy by the fact that there are some pretty constant relations between the positions of the lips and the sizes of the natural teeth, which can be used as guides. They are:

That nature places the cutting edges of the upper centrals about

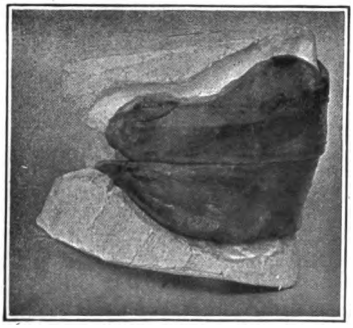

Fig. 7. Properly made trial plates are essential to perfect articulation of artificial teeth. Base plates of composition should be shaped over the models, strengthened with wire, and wax ridges added.

As will be seen in subsequent illustrations the basic lines which are used in selecting the proper form and size of Twentieth Century tooth for the case are made on these trial plates, namely the high line, the low line, median line and the line showing the distal sides of the cuspids.

It is extremely important, therefore, that these trial plates properly fit the mouth to permit the correct location of these lines.

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1.5 m.m. below the edge of the upper lip when at rest. This gives proper expression to the upper lip and the proper outward turn to the edge of the lower lip. The teeth then show to advantage in speaking. The edges of the artificial upper centrals should be similarly placed.

Fig. 8. In the vast majority of cases, the upper lip is raised in smiling, as shown in this illustration, till its edge is level with the necks of the upper centrals.

About three people out of four raise the upper lip, in smiling, till its edge is level with the necks of the upper centrals. This prevents the exposure of much gum. In hearty laughing the lip is raised above the necks. The necks of the upper artificial centrals may with advantage be located on the same level. There will then be no unpleasant display of gum.

If the orifice of the mouth is well proportioned to the face, the distal angles of the artificial cuspids may well come opposite the corners of the orifice. Upper anteriors of this width are usually best suited to the patient's face. If the orifice is large or small in proportion to the face, it is well to mark the locations of its corners and make any desired change later.

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The necks of the lower centrals may well come on the same level as the edge of the lower lip when depressed by the depressor muscles. This prevents the exposure of the lower gums, under ordinary conditions.

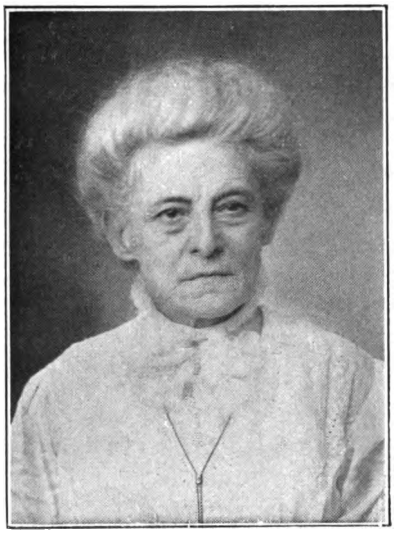

Fig. 9. Edentulous patient showing drooping of soft tissues following extraction of teeth. The labial ends of the alae and septum droop and the tissues in the labial triangle sink inward. (This picture and No. 10 were taken in the same light at the same time, and illustrate very clearly the possibilities in restoration.)

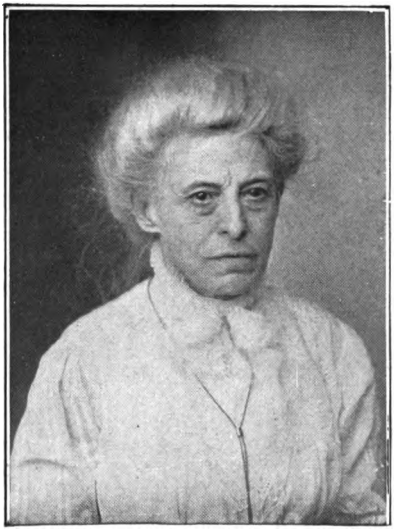

Fig. 10. Patient with trial plates properly built up and out as in illustration No. 11. The tissues in the labial triangle, the alae and septum, and the corners of the orifice of the mouth have been lifted by making the plate high over the cuspid eminence. Contrast the appearance here and in No. 9.

HOW TO APPLY THESE POSITIONS OF THE LIPS.

In applying the lip positions described in the foregoing to the selection of the size of teeth required for the case, the following procedure must be adopted:

It is necessary to make proper trial plates, insert them in the mouth, trim for length and fullness until the lips rest in the desired positions, and then mark on the wax the locations of the lips.

Proper trial plates can be made after the following manner, that is; by making proper models of both jaws, by shaping over them baseplates of some substance which will support the teeth during the several operations of denture making, and by shaping on each baseplate a rim of wax, or modelling compound, which takes the place of the teeth, and which can be trimmed for length and fullness.

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The upper trial plate is placed in the mouth and trimmed to be vertically 1.5 m.m. (1/16 inch) longer than the upper lip in the median line. The lower trial plate is warmed and placed in the mouth and the jaw is pressed upward until the lips touch lightly in repose.

An instrument is carefully placed between the lips as they lie touching, is moved to one corner of the orifice of the mouth and then the other, and the locations of the corners marked on the wax.

The patient is then caused to raise the upper lip as in smiling, and the level of its edge is marked on the wax. This is the high line.

The lower lip should then be depressed by the depressor muscles and the level of its edge marked on the wax. This is the low line.

GETTING THE DIMENSIONS OF THE REQUIRED TEETH IN MILLIMETERS.

With each Twentieth Century Solila Mould Book will be found a flexible millimeter rule. This is made of celluloid as being more

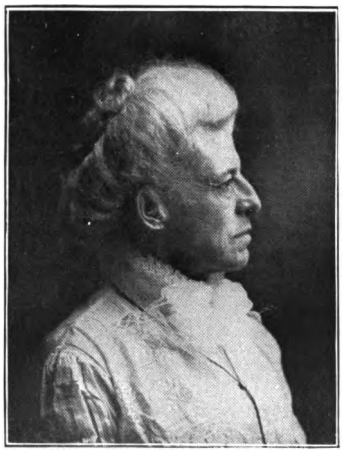

Fig. 11. Patient with trial plates in position. The labial ends of the alae and septum are pushed up to place, vivifying the expression. The lips are built out in harmony with the general facial contour. Note the animated and vigorous expression.

Fig. 12. The white line is drawn from the lowest point of the wing of the nose to the upper part of the tragus of the ear. It is parallel with the occlusal plane of the natural teeth. The occlusal surfaces of the trial plates should be made parallel with the line.

easily bent and less affected by shrinkage. The celluloid for the measures was especially selected and seasoned before the measures were made.

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With this celluloid rule, measure the distance from the high line of the upper trial plate to the labio-incisal angle of the trial plate. Illustration No. 22. That is the length of the exposed surface of the upper central. In Twentieth Century Solila and Dentsply Teeth* add 1 m.m. for collar, to go into the vulcanite. Write down "Length Central m.m."

Fig. 13. Shaping the occlusal surfaces of the upper trial plate to be parallel with the line on the face by pressing a table knife upward against the softened ridge of the upper trial plate.

Fig. 14. Marking high line on trial plate Have the patient raise the upper lip as in smiling and mark the level of its ridge on the wax with a sharp instrument.

Measure from the pinhole to the labio-incisal angle. That distance is the greatest length of bite and shut mechanically suitable for the case. Write down "bite and shut -- m.m."

Invert the upper trial plate. Bend the measure along the incisal edge and measure from the mark for the distal angle of one cuspid to the mark for the distal angle of the other cuspid, as in illustration No. 23. That is the width of the upper six anteriors, set up. Write "Combined width six anteriors -- m.m."

Measure around the trial plate from the mark for the distal side of one second molar to the mark for the distal side of the other second molar. That distance is the width of the full 14 teeth, set up. Write "width full 14 set up. -- m.m."

THE DIMENSIONS OF LOWER TEETH.

When full upper and lower dentures are being made together, with Twentieth Century Solila or Dentsply Teeth, it will not be necessary to measure for the dimensions of the lower teeth, since the

*Dentsply teeth have platinum, palladium and gold alloy baked-in pins and are supplied on order. They are identical in porcelain, shades and moulds with Twentieth Century Solila teeth.

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uppers and lowers in the 44 vulcanite moulds shown in Table No. 1, this book, have been carefully carded to correct widths of uppers and lowers.

When it is desired to obtain the dimensions for lower teeth, the length of the lower centrals may be gotten by measuring from the rest line to the low line and adding 1 m.m. for collar. The greatest length of bite and shut available may be ascertained with a pin in the same manner as on the upper trial plate.

The width of the lower anteriors may be ascertained by measuring around the trial plate from opposite the tip of one upper cuspid to a mark opposite the tip of the other upper cuspid. This is pos-

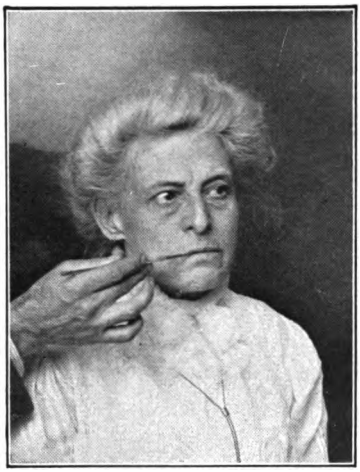

Fig. 15. Marking location of corners of orifice on trial plate.

Fig. 16. Marking the location of the low line on lower trial plate.

sible because the distal angles of the lower cuspids come directly below the tips of the upper cuspids.

SELECTING TEETH BY THESE MEASUREMENTS.

For the ordinary methods of selection, the millimeter dimensions would be of little value. But each Twentieth Century Solila and Dentsply mould has been carefully measured in those diameters which correspond with the measurements on the trial plates. It is necessary therefore only to turn to the tables of such dimensions of the teeth, and select the mould or moulds which most closely correspond with the requirements. This is very much more rapid

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and satisfactory than selection by the ordinary method of examining many teeth.

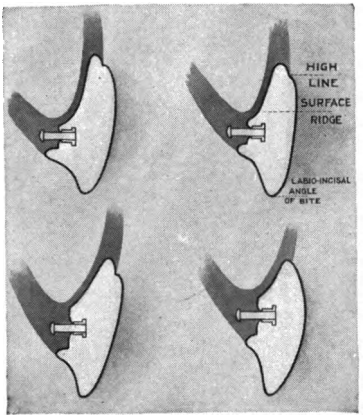

Fig. 17. Four different mechanical conditions in plates where teeth of the same length and width are indicated.

In the upper left illustration, there is little alveolar absorption and a tooth with short combined bite and shut is indicated.

In the upper right illustration, there is more absorption. A tooth of the same length, but with longer combined bite and shut is required.

In the lower left illustration, the absorption is still greater, and in the lower right illustration it is complete requiring a long bite and shut.

Four moulds of teeth having the same lengths but different combined bites and shuts are indicated for these different mechanical conditions. Twentieth Century teeth permit selection to suit such cases. The moulds used are shown in illustration No. 18.

The short bite mould has less cutting power than the longer bite teeth. It crushes through food rather than cuts through. It also makes a more awkward place for the tongue.

SELECTION FOR MECHANICAL FITNESS.

The fact that a mould is of the right length and width to produce a certain pleasing effect, does not insure its being of such mechanical fitness that the dentist can put the teeth easily into their proper places. It is easily possible to learn in advance of the actual selection just what dimensions a mould must have to go to place with a minimum of grinding.

The first requirement is to make sure that the anteriors will go between the surface of the ridge and the labio-incisal angle of the trial plate. Then the desired width of the full set should be ascertained in order that they may be of correct width to bring the second molars in proper locations.

Both these dimensions may be easily gotten.

The lingual surface of an anterior tooth is divided into three parts, the bite, shut and ridgelap.

The bite and shut are supposed to sit below the upper ridge or above the lower ridge as in illustration No. 17. The ridgelap is supposed to lap the ridge to carry the labial side of the tooth to the high line or low line.

The first essential then is to learn the amount of free space between the surface of the ridge and the labio-incisal angle of the trial plate. The bite and shut of the mould must not be longer than this distance, or the teeth will not go easily to place.

To determine this distance, hold the upper trial plate with the palatal surface upward, and thrust a pin through from the labial

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surface of the ridge at the median line so that it may be seen from the palatal, where it would just touch the deepest part of the ridge. Illustration No. 20 shows half a trial plate with the pin in position. The distance from the pinhole to the labio-incisal angle of the trial plate will be the greatest distance available for the combined bite and shut.

Mould 4. Combined bite and shut 4½ mm.

Mould 13. Combined bite and shut 7 mm.

Mould 11. Combined bite and shut 6 mm.

Mould 14. Combined bite and shut 7½ mm.

Fig. 18. Enlarged photographs of the four centrals indicated in illustration No. 17. All centrals are of the same length and the six anteriors from all the moulds are of similar combined width.
(See the note regarding these teeth with Fig. 17.)

After the trial plates are out of the mouth a vertical mark should be made on each side of the upper trial plate to indicate how far back the teeth are to extend. From this mark on one side, around to a similar mark on the other side, will be the width of the full 14 teeth set up.

HOW TO USE THE TABLES OF TOOTH MEASUREMENTS.

In the column marked "Length of Central," locate all the moulds

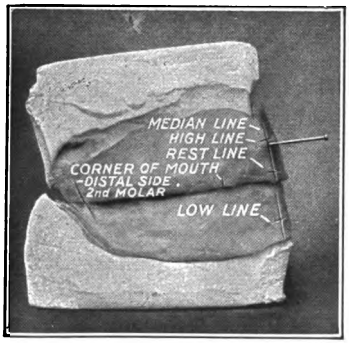

Fig. 19. Side view of properly marked trial plate after removal from mouth.

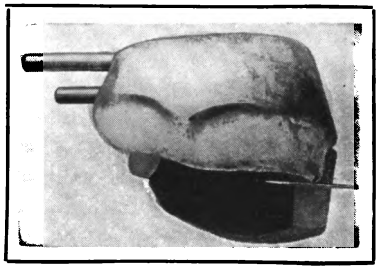

Fig. 20. Section of trial plate in No. 19. Pin level with surface of ridge. The distance from pin hole to occlusal surface of the trial plate equals the greatest available bite and shut in the tooth.

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having centrals of the length required. There will usually be several moulds in which the centrals are of the right lengths. Then from among the moulds having the right length of centrals, separate those having the anteriors nearest the correct width, as shown in the column marked "Width six Anteriors."

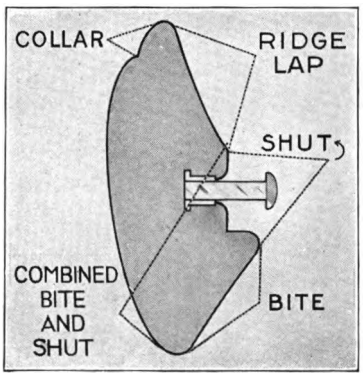

Fig. 21

Fig. 22

Fig. 23

Fig. 24

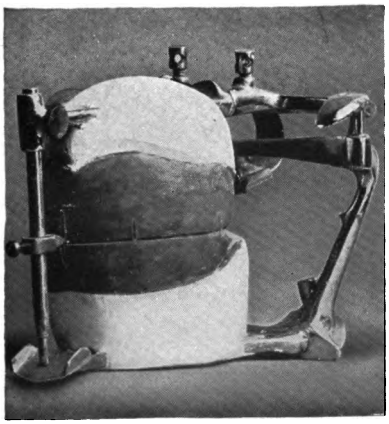

Fig. 25

Fig. 21. Diagram explaining artificial tooth terms used in this book and their location, excepting "labial," which is self-explanatory.

Fig. 22. Measuring the trial plates vertically for length of central.

Fig. 23. Measuring trial plate for width of anteriors and fourteen. Distance between marks at corners of mouth, 45 millimeters. Distance between marks for second molars, 108 millimeters.

Fig. 24. On the right—Bite measured in illustration Nos. 18 and 19.
On the left—Teeth selected from measurements.

Fig. 25. Models mounted by means of the Incisor Guide.

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The next column to the right records the width of the full 14 teeth of each mould, when set up. From among those so far correct, select those moulds in which the width of the 14 is satisfactory.

From among those remaining as satisfactory, select one in which the combined bite and shut of the central is correct. This should

Fig. 26. Patient for whom bites were made in illustration No. 24, wearing the teeth shown there.

Fig. 27. Patient for whom lowers were selected by the method which is described here.

not be much greater than the distance from the pin hole to the cutting edge of the trial plate. It is better if it is not much less. For the possibilities in this dimension see illustration No. 17.

It will sometimes be necessary to make concessions in one or more of the measurements, but centrals of the correct length and anteriors of approximately the correct width and bite and shut may nearly always be obtained.

EXAMPLE.

Suppose that the measurements on the trial plate indicated that teeth were required of the following dimensions:

Length of central	11¼ m.m.
Combined bite and shut	8 m.m.
Width 6 anteriors	48 m.m.
Width full 14	115 m.m.

The tables show that there are 2 moulds having centrals exactly 11¼ m.m. long, and 9 moulds having centrals within ½ m.m. of that length. A millimeter is equal to 1/25 of an inch and ½ m.m. either way in such selections is close enough.

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Of these 11 moulds, 4 have the six upper anteriors within 1 m.m. either way of the right combined width. Of these 4 moulds, all have practically the right width of full 14, set up and 8 have approximately the correct bite and shut. These moulds are Moulds 10, 8, 35, 103 and they are practically correct in all the important dimensions. From among these, one mould may be selected which harmonizes in outline with the patient's face, and the order for the teeth may be made out by the mould number.

It may take some time to select the first two or three sets by this method, but after the technic is learned, selection may be made in 5 minutes.

ADVANTAGES.

Several advantageous results are obtained by the Twentieth Century Method of Selection. They are:

Once the technic is learned, much time is saved.

The confusion resulting from seeing many moulds is avoided.

Selection is made by the dentist, who is the person most competent to select.

Orders may be more intelligently sent and more quickly and accurately filled.

Anteriors of the right length and width to harmonize with the face are secured. This overcomes the very common effect of selecting anteriors too short or too narrow.

The patient does not expose more of the bicuspids and molars in smiling than should be the case.

The bicuspids and molars are kept back where the jaw is able to do the most grinding and in this way the patient gets the best chewing value from the plate.

SELECTING THE SHADE.

Having secured the measurements for the mould, care must be taken to select the shade which will harmonize with the colors in the complexion. If this be carefully done there will be none of the ghastly and conspicuous appearance which characterizes many sets of artificial teeth. The well selected plate should be inconspicuous because it harmonizes so well with the rest of the face that it does not draw unto itself special attention.

Get it firmly in mind that there are few if any cases requiring white teeth. Every complexion usually shows several colors of shades, including the yellow or pink of the flesh, the blue, gray,

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brown or the black of the eye, and the color of the hair. If the face be looked at with the eyelids half closed so that one looks through the lashes, all the elements will often blend into one general shade. It is with this general shade that the tooth selected must harmonize in color to produce the best results.

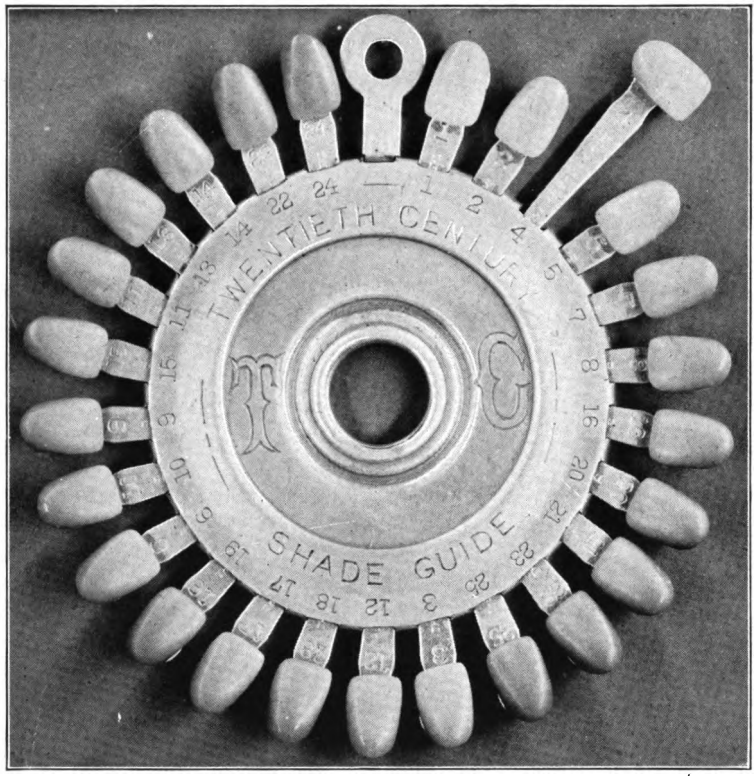

Fig. 28. Actual size reproduction of Twentieth Century Shade Guide containing twenty-five teeth of one mould showing the twenty-five shades in which all of The Dentists' Supply Company's products are made. Each tooth in the ring can be drawn out for selecting or matching shades and can be turned in any desired direction.

This guide may be obtained from leading dealers everywhere.

If the dentist, before extracting, will carefully match the shade of any remaining natural teeth and record it, the selection of artificial teeth may be made simple and very satisfactory.

Just as the selection of artificial teeth has been made largely mechanical by the methods outlined in this book, so the selection of shades can be made largely mechanical by an intelligent use of the Twentieth Century Shade Guide, which may be obtained from all dealers.

Pay attention to the light in which the patient sits. The patient's face should be well illuminated, but when the remaining teeth and the Shade Guide Tooth are exposed, the light should not

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fall on them in such way as to reflect a glaze, since this will mislead the dentist who is making the selection.

Neither the remaining natural teeth nor the artificial teeth should be allowed to become dry during the matching, but each should show the slight moisture characteristic of the mouth. If

COMPARATIVE SHADE CHART.

For matching other shade guides with Twentieth Century Shades. To match a shade, locate the number of that shade under the name of the guide or ring. The nearest Twentieth Century shade will be found on the same line, first column to the right. Where two numbers are given the shade runs from the first toward the second.

S.S.W. Old Ring	T.C. Ring	S.S.W. Bar	T.C. Ring	H.D. Justi Bar	T.C. Ring	C.D.M. Co. Ring	T.C. Ring	Sibley Ring	T.C. Ring	J.&L. Ring	T.C. Ring	Ash Ring	T.C. Ring
1	1	26	1	1	4-5	51	3	1	5	0	1	B1	5
2	1	27	2	2	8	52	1	2	10	1	2	B2	9
3	2-3	28	6	3	8	53	Dk-2	3	Lt-15	2	Lt-5	B3	16
4	Dk-12	29	11	4	7	54	6	4	15	3	6	B4	20
5	Lt-12	30	12	5	16	55	11	5	Dk-15	5	Lt-11	B5	21
6	13-18	31	13	6	Dk-16	56	14	6	12	6	5	C1	6
7	18	32	14	7	2	57	12	7	Dk-12	8	Dk-15	C2	2
8	18-23	33	18	8	6	58	13	8	Dk-12	10	9	C3	Dk-3
9	8	34	4	9	12	59	18	9	Dk-12	11	11-13	C5	12
10	7	35	5	10	15	60	4	10	18	12	9	D1	11-Lt-13
11	9	36	8	11	13	61	5	11	Dk-6	16	8	D3	14
12	10	37	7	12	22	62	8	12	7	18	Lt-9	D5	25
13	Dk-16	38	9	13	9	63	7	13	16	19	Dk-16	E1	13
14	21	39	10	14	Dk-9	64	9	14	21	20	22-25	E3	14
15	20	40	15	15	15	65	10	15	24	30	7	E5	23
16	16-21	41	16	16	13	66	Dk-9	16	Dk-5	32	13	F1	9
17	22	42	20	17	14	67	15	17	8	38	Lt-22	F3	16
18	24	43	21	18	24	68	16	18	7	40	23	F5	21
19	Dk-15	44	Lt-17	19	Lt-17	69	20	19	2-9	42	24	G	Dk-23
20	25	45	Dk-17	20	Dk-17	70	21	20	15	48	Dk-11	H2	11
21	24	46	19	21	Dk-20	71	Lt-17	21	9	49	15	H4	14
22	Lt-17	47	22	22	23	72	Dk-17	22	17	60	Lt-17	NB1	4
23	Dk-17	48	23	23	24	73	19	23	20	61	Dk-17	NB2	5
24	19	49	24	24	25	74	24	24	Lt-20	69	Lt-13	NB3	7
25	24	50	25			75	25	25	21	85	23	XB1	Lt-6
										89	18-23	XB3	9
												XB5	20

The shades given here for guides other than Twentieth Century are approximate, since unavoidable variations in sample shades of any manufacturer make exact matching difficult.

This chart, printed on card 9½ by 7 inches suitable for hanging in operating room may be had free from your dealer or on application to THE DENTISTS' SUPPLY COMPANY, 220 West 42nd Street New York City.

the natural tooth be kept dry a few moments, it will so change color that the shade which matches it while dry will not match it at all when moist. A little moisture on the artificial tooth will make it appear as it will in actual use. Shut off side lights.

HOW TO USE THE TWENTIETH CENTURY SHADE GUIDE.

Our task is to decide what color is required for the case and what shade of that color. There are two ways of doing this. Some dentists are so skillful at detecting colors that by a mere glance at the face they can decide that a yellow or a gray or a blue tooth is necessary. But the great majority of dentists arrive

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at this conclusion from intelligently using the sample teeth. The Twentieth Century Shade Guide shows six colors: white, blue, yellow, gray, green and brown. There are twenty-five shades of these colors as follows:

There are four whites: Nos. 1 and 2 whitish, No. 3 a bluish white, No. 4 milk white.

There are eight shades of yellow: Nos. 5 and 8 cream yellows, Nos. 7, 9, 10, and 15 straw yellows, Nos. 16, 20 and 21 yellows.

There are four blues: Nos. 6 and 12, light blues, the blue in No. 6 being almost wholly in the incisal third; Nos. 13 and 18 dark blues.

Three grays: No. 11 light gray, No. 14 gray, No. 22 dark gray.

Nos. 17 and 19 are greens.

No. 23 is a green brown and Nos. 24 and 25 are browns.

Let us try the sample teeth representing these shades under the lip and select that which harmonizes best. Let us, however, keep away from the four shades of white. If we find that we must come back to these, well and good, but the chances are that we shall do well to stay away from them.

We may try first, a yellow. Of the yellow shades perhaps No. 10 is most representative. Lay aside the other sample teeth and place No. 10 under the lip, moistening it against the lip as the natural teeth are moist. Allow it to remain in position long enough for the color in the tooth and the colors in the complexion to make a clear impression on the mind. It can then be decided whether yellow harmonizes with the complexion or represents a contrast. If it represents a contrast, we shall look for another color. If it harmonizes, but the shade does not seem to be exactly right, we can easily determine which of the eight yellows harmonizes best, and order therefrom.

If it does not harmonize, it will be well to try sample tooth No. 12, which is a light blue, under the lip in the same way. Should blue harmonize with the complexion and the shade be a trifle too dark, sample tooth No. 6 may be put into position since it is lighter than No. 12 and has nearly all of the blue in the incisal edge. Should No. 12 not be dark enough, Nos. 13 and 18 will offer darker blues.

If neither the yellow nor the blue suit the complexion, No. 11 or No. 14 may be tried in the same way. Should these be of the

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right color but not dark enough in shade, No. 22 is a dark gray and will supply the lack.

Should none of these be what is desired, No. 17 may be tried for a green, No. 23 for a blend of green and brown, Nos. 24 and 25 as browns.

If after careful consideration none of the above colors are suitable, it will probably be found that one of the whites will be what is desired and for this purpose No. 4, which is a milk white, and No. 3, which is a blue white, will probably answer.

A method for determining the color which is in successful use by many dentists is to determine what color predominates in the complexion first. They do this by laying the shade guide teeth, one at a time, against the cheek and determining which of the colors presented there harmonizes best with the skin. They also determine which of the shades of that color is most harmonious. If this shade now be tried under the lip it will usually be found to produce a very pleasing effect in combination with the rest of the face.

In selecting teeth do not work too rapidly, but do not look too long at one time. Five seconds is as long as the vision is color true at one time. Many short trials are preferable to fewer long ones. The results from it are so very much more satisfactory than from less careful selection of teeth that it well repays the exercise of what little patience is required to learn this part of prosthetic work.

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ANATOMICAL MOULDS IN BICUSPIDS AND MOLARS.

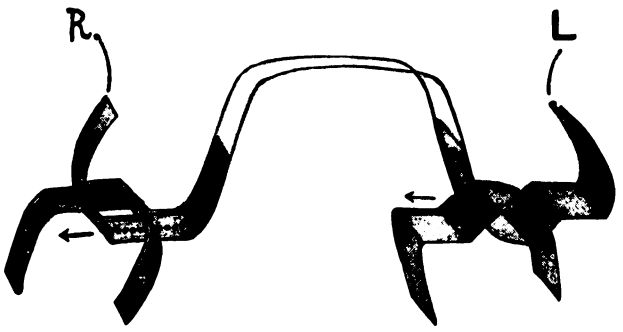
Up to March of 1909 anatomical moulds in molars and bicuspids were not obtainable. In that month we introduced the first bicuspids ever commercially made which conformed to the requirements of articulation.

WHAT ANATOMICAL MOULDS ARE.

They are teeth shaped by the manufacturer so that the uppers and lowers articulate properly during lateral movements of the jaw. There is a difference between occlusion and articulation. Occlusion is the mere shutting of the teeth together with a straight up and down movement. Almost any forms of teeth can be made to occlude satisfactorily. Articulation consists in proper contact during the lateral masticating movements of the jaw.

Teeth cannot be readily articulated by the dentist unless the manufacturer understands the requirements of articulation and shapes the teeth to conform to them. These requirements may be briefly outlined as follows:

The teeth must be of the proper relative proportions throughout the upper and lower sets.



(From The Dental Cosmos)
No. 29

When the upper and lower buccal cusps are interdigitated, as seen below the letter R, there should be a considerable rectangular space as here shown. Since only the food held in this space can be crushed, teeth which do not form such a space have little masticating power.

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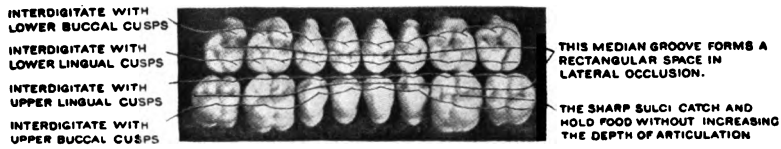
Their occlusal surfaces must be so shaped as to maintain proper articulation of the cusps of one set with the grooves of the opposing set during lateral movements.

They must be so shaped that when the jaw is in lateral articulation there shall exist between the occlusal surfaces of the uppers and lowers a satisfactory space for holding food. If this space, commonly referred to as "the rectangular groove" is not present, no food can be held between the teeth and of course none can be crushed. Certain manufacturers who have produced improved forms of teeth since the anatomical moulds were a proven success have overlooked this fact and have produced forms which are not well suited to hold food for crushing.

The cusps of opposing sets must be of the heights necessary to maintain grinding relations on one side of the mouth and "balancing relations" on the other side, at the same time, during lateral movements.


INTERDIGITATE WITH LOWER BUCCAL CUSPS
INTERDIGITATE WITH LOWER LINGUAL CUSPS
INTERDIGITATE WITH UPPER LINGUAL CUSPS
INTERDIGITATE WITH UPPER BUCCAL CUSPS
THIS MEDIAN GROOVE FORMS A RECTANGULAR SPACE IN LATERAL OCCLUSION.
THE SHARP SULCI CATCH AND HOLD FOOD WITHOUT INCREASING THE DEPTH OF ARTICULATION

No. 30

Detailed formation of occlusal surfaces of one of the Anatomical Moulds of The Dentists' Supply Co. Every part of each surface is carved to exact articulation with those parts of the opposing teeth which antagonize it in occlusion and articulation.

The cusps must have great grinding power. Because the cusps on the natural teeth of old people are worn flat, some manufacturers of teeth have thought that the cusps on artificial teeth should be very flat also. There is no relation between the two. The natural teeth are fixed in the jaw and may sometimes exert a pressure of 200 lbs. The artificial teeth are mounted on loose bases and exert much less power. The artificial teeth should therefore have cusps sharp enough to grind the food with the exercise of small power. The occlusal surfaces of the anatomical moulds are just rounding enough to permit of easy articulation by the dentist and comfortable use by the patient, while exhibiting good grinding power.

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Twentieth Century Solila Teeth

No. 31

Slightly enlarged view of occlusal surfaces of one of the Anatomical Moulds of The Dentists' Supply Co., showing detailed formation. When these teeth are placed in the position outlined in illustration No. 29, they form a large rectangular groove into which they lock the food. Here it is crushed.

It is evident that teeth which are to conform to these requirements must be carved to correct articulation, one set with the other, by the manufacturer. Improperly formed teeth cannot be ground to meet such requirements save in the crudest manner. It would demand such knowledge of forms, such skillful and patient technic and such expenditure of time as would make it impracticable, even at the hands of the most enthusiastic worker.

Teeth Carved to Meet These Requirements

The anatomical moulds of The Dentists' Supply Company were carved with a knowledge of these requirements. The several teeth in the different sets are well proportioned. The occlusal surfaces are so sloped that the teeth may be set in the proper vertical relations to the ridge and have the occlusal surfaces in the proper planes.

The uppers and lowers of each mould are carved to careful articulation one with the other and may be articulated with very little grinding. Indeed, grinding with the stone is often unnecessary, and only the little high points caused by the flowing of the porcelain need to be reduced by the use of carborundum powder and oil.

So carefully have the relations of the opposing occlusal surfaces been effected that these teeth are more efficient in mastication than other porcelain teeth. They have distinct added value for the patient.

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Twentieth Century Solila Teeth

The Question of Setting the Teeth.

While the anatomical moulds offer the dentist the possibility of setting for articulation as now understood, they may be set for occlusion only, and the patient benefitted thereby. Many dentists do not wish to set teeth for the lateral movements, but the jaw is almost sure to make lateral movements. It follows logically that the better the teeth are suited to the lateral movements, the more efficient and pleasing the results will be to the patient. If the anatomical moulds are set in this way, the results will be much better than if what we call "the old moulds" of teeth are used.

For the dentist who wishes to use anatomical articulators and set the teeth for anatomical articulation, these moulds are particularly well suited. They lend themselves to his every effort for masticating and balancing articulation. They require little or no grinding. And they afford the patient a pleasure and efficiency which are exceeded only by wearers of Trubyte Teeth.

Sizes in Anatomical Moulds.

The anatomical moulds of The Dentists' Supply Company are made in four mesio-distal widths and two vertical lengths, as follows:

Mould 98, small upper bicuspids and molars, one side 27.5 m.m. wide
" 97, " " " " " " " 29.5 "
" 55, " " " " " " " 30. "
" 99, medium " " " " " " " 31. "
" 100, large " " " " " " " 32.5 "
" A50, same as mould 99, with longer bicuspids.
" A93, same as mould 100, with longer bicuspids.

Regularly Carded with Certain Anteriors.

The demand for the anatomical bicuspids and molars almost instantly became so great as to largely replace what we call "the old moulds." We therefore selected from our long line of moulds, 44 of the most popular upper vulcanite moulds and the lower

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moulds which best articulate with them, and regularly "card" or furnish these 44 moulds with the anatomical bicuspids and molars. The numbers of these moulds are as follows:

Upper Mould	Carded with Molar Mould	Articulating Lower Mould	Upper Mould	Carded with Molar Mould	Articulating Lower Mould	Upper Mould	Carded with Molar Mould	Articulating Lower Mould
2	99	39	19	99	17	52	98	118
4	99	67	20	99	61	65	99	39
5	99	63	21	55	14	67	55	14
6	99	39	22	99	67	68	98	14
7	99	67	23	99	3	70	98	67
8	99	39	27	99	62	74	A50	11
9	99	A5	35	99	39	78	A50	78
10	A50	50	36	55	67	87	100	78
11	99	67	42	98	118	88	99	A5
12	99	A5	44	98	14	89	55	61
13	55	14	45	100	49	90	99	39
15	98	14	47	99	A5	93	A93	74
16	55	67	48	99	103	103	99	3
17	98	14	50	A50	34	104	100	103
18	98	14	51	99	61			

THE 44 UPPER ANTERIOR MOULDS AND 17 LOWERS.

Careful observers in the profession and the dental trade have long been of the opinion that it is unnecessary for manufacturers to bewilder dentists by the seemingly endless list of moulds from which selection may be made. We manufacture hundreds of moulds of vulcanite teeth and other manufacturers do likewise.

It is, however, the experience of practically every tooth manufacturer and dental depot that the greater proportion of teeth are selected by dentists from certain moulds, relatively few in number. One manufacturer states that 80% of his business is in five moulds. While such is not the case with us, the greater proportion of the business is confined to relatively few moulds. That is, these moulds are ordered again by the depots for their customers. They are, in fact, selected by the dentists themselves from among the many moulds, and are endorsed with continual favor as the best moulds.

The ideal method of offering dentists teeth is to offer them, first of all, this line of selected moulds with the assurance that they have long been found equal to practically all the demands of ordinary practice; and then to offer, as secondary, a longer line from which choice may be made if the first line is not sufficient.

We have done this. The dentists and depots have selected from our hundreds of moulds 44 upper vulcanite moulds and 17 lower vulcanite moulds to articulate with them. We card these moulds regularly with anatomical bicuspids and molars, so that it is not necessary, when ordering them, to specify anatomical moulds. The dimensions of these upper moulds form Table No. 1.

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Twentieth Century Solila Teeth

Advantages to You.

Use of these 44 selected Twentieth Century Solila and Dentsply moulds regularly carded with anatomical bicuspids and molars gives the following distinct advantages:

You are assured, first of all, that these moulds have been found best by hundreds of dentists, through a number of years. You know at once that selections from these moulds represent the best selections possible. You are spared search through many moulds with less desirable characteristics.

You have other advantages. We have long been persuading depots to confine the bulk of their tooth stocks to these moulds and carry all the shades. Most depots have complied. Any depot will comply when assured that its customers desire it. If you make your selections from these 44 upper and 17 lower moulds, your dealer will all the more willingly keep them in stock in all shades. You are, therefore, more likely to find just what you want at hand when wanted than if the depot stock is divided among hundreds of moulds, some of which move but slowly. It will, therefore, be to your own advantage to make selections from these moulds, so far as possible.

Our other vulcanite moulds to be shown in an appendix may be had with anatomical bicuspids and molars, on special order, and with some little delay. But they are not regularly carded with anatomical bicuspids and molars.

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TWENTIETH CENTURY SOLILA ASSORTMENT No. 914

The practical value of the system of artificial teeth which the Twentieth Century Solila moulds listed in this mould book constitute is further enhanced by the use of Twentieth Century Solila Assortment No. 914.

This assortment does not contain all of the "Regularly Carded" moulds shown in this book, but rather a careful selection of them. The regular stock assortment contains those moulds which have been proved by a long study of the tooth orders of thousands of dentists over a period of years to be those most frequently indicated. In this assortment the dentist can, in the vast majority of cases, select a mould and shade suitable for the case in hand.

Use of Assortment 914 in connection with this mould book enables the dentist to try the apparently indicated mould in the patient's mouth and definitely determine its suitability. In rare cases when the assortment does not contain a suitable mould the required mould can be found among those in this book not included in the assortment.

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Advantages resulting from the use of this assortment are apparent. Constant ordering for each case from the mould book is eliminated, rush orders for emergency cases are done away with and a distinct saving over the unit cost of the teeth is effected.

Assortment 914 contains, as the name indicates, 914 teeth in carefully selected moulds and shades, distributed as follows:

67 x 6 Twentieth Century Solila Plain Upper Anteriors
24 x 6 Twentieth Century Solila Plain Lower Anteriors
23 x 8 Dentsply Diatoric Upper Bicuspids and Molars
23 x 8 Dentsply Diatoric Lower Bicuspids and Molars

While, as previously explained, this assortment is made up of moulds which have been found to be indicated for the vast majority of cases in the average practice, certain dentists have found that the usual requirements of their practice differ from the average.

If, upon inspection, Assortment 914 is found lacking in moulds and shades frequently indicated in your practice and to contain other moulds rarely used, the necessary substitutions can be made.

To be of constant service this assortment should be kept complete. Whenever a card of teeth is taken out for use a new set should be ordered at once and replaced. If only a part of a card is used, the teeth taken off should be replaced. In this way the assortment will always be full and ready for use.

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DIMENSION TABLES

AND

ILLUSTRATIONS

OF

LOWER MOULDS

including

Moulds Regularly Carded with Anatomical Bicuspids and Molars.

Moulds Carried in Partial Sets Only.

Old Form Bicuspids and Molars.

Anatomical Bicuspids and Molars.

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TABLE NO. 7

PLAIN VULCANITE LOWER MOULDS

REGULARLY COMPRISING ANATOMICAL BICUSPIDS AND MOLARS.
(ALL DIMENSIONS ARE IN MILLIMETERS.)*
ARRANGED ACCORDING TO SIZE

Mould No.	Length of Central	Width of Central	Bite of Central	Shut of Central	Ridge-lap	Combined Bite and Shut of Central	Approx. width 6 anteriors set on Bonwill Circle	Approx. width 4 incisors set on Bonwill Circle	Approx. width full 14 set on Bonwill Circle	Articulates best with upper moulds	Cut on page
14	9.	4.5	2.5	4.	2.5	7.	34.	20.5	97	68–15–17–18–13–67–44–21	57
118	9.25	4.25	2.5	4.5	2.5	7.5	31.5	18.5	94	52–42	57
A5	9.75	5.25	2.5	4.5	3.	7.5	36.5	23.5	107	9–12–47–88	57
67	10.	5.	3.	4.5	2.5	8.	36.	23.	107	4–7–11–16–22–36–70	57
3	10.25	4.75	2.5	4.5	3.5	7.5	37.5	22.	108	23–103	57
61	10.25	4.75	3.	4.5	3.5	8.	32.5	19.5	103	51–89–20	57
62	10.5	4.25	3.	4.5	3.	8.	35.	21.	106	27	58
39	10.5	5.	3.5	4.	3.	8.	37.	22.5	108	2–6–8–65–35	58
103	10.5	5.5	4.5	3.5	3.	8.5	39.	24.	115	104–48	58
63	11.	4.5	3.	6.	2.	9.5	32.5	19.	103	5–90	58
49	11.25	5.75	3.5	4.	3.5	8.	39.5	25.	115	45	58
78	11.75	5.5	3.5	4.	4.5	8.	40.	24.5	116	78–87	58
50	12.	5.	3.	6.	3.	9.5	36.	20.5	107	10	59
11	12.25	4.75	4.5	3.	5.	8.	38.	22.	109	74	59
34	12.75	5.	3.5	6.	3.	10.	37.5	22.	108	50	59
74	13.5	5.75	4.	5.	4.5	9.5	40.	24.5	116	93	59

TABLE NO. 8

REGULARLY CARDED LOWER MOULDS
ARRANGED IN NUMERICAL ORDER

Mould No.	Length of Central	Width of Central	Bite of Central	Shut of Central	Ridge-lap	Combined Bite and Shut of Central	Approx. width 6 anteriors set on Bonwill Circle	Approx. width 4 incisors set on Bonwill Circle	Approx. width full 14 set on Bonwill Circle	Combines with molar mould	Cut on page
3	10.25	4.75	2.5	4.5	3.5	7.5	37.5	22.	108	23–103	57
A5	9.75	5.25	2.5	4.5	3.	7.5	36.5	23.5	107	9–12–47–88	57
11	12.25	4.75	4.5	3.	5.	8.	38.	22.	109	74	59
14	9.	4.5	2.5	4.	2.5	7.	34.	20.5	97	68–15–17–18–13–67–44–21	57
34	12.75	5.	3.5	6.	3.	10	37.5	22.	108	50	59
39	10.5	5.	3.5	4.	3.	8.	37.	22.5	108	2–6–8–65–35	58
49	11.25	5.75	3.5	4.	3.5	8.	39.5	25.	115	45	58
50	12.	5.	3.	6.	3.	9.5	36.	20.5	107	10	59
61	10.25	4.75		4.5	3.5	8.	32.5	19.5	103	51–89–20	57
62	10.5	4.25	3.	4.5	3.	8.	35.	21.	106	27	58
63	11.	4.5	3.	6.	2.	9.5	32.5	19.	103	5–90	58
67	10.	5.	3.	4.5	2.5	8.	36.	23.	107	4–7–11–16–22–36–70	57
74	13.5	5.75	4.	5.	4.5	9.5	40.	24.5	116	93	59
78	11.75	5.5	3.5	4.	4.5	8.	40.	24.5	116	78–87	58
103	10.5	5.5	4.5	3.5	3.	8.5	39.	24.	115	104–48	58
118	9.25	4.25	2.5	4.5	2.5	7.5	31.5	18.5	94	52–42	57

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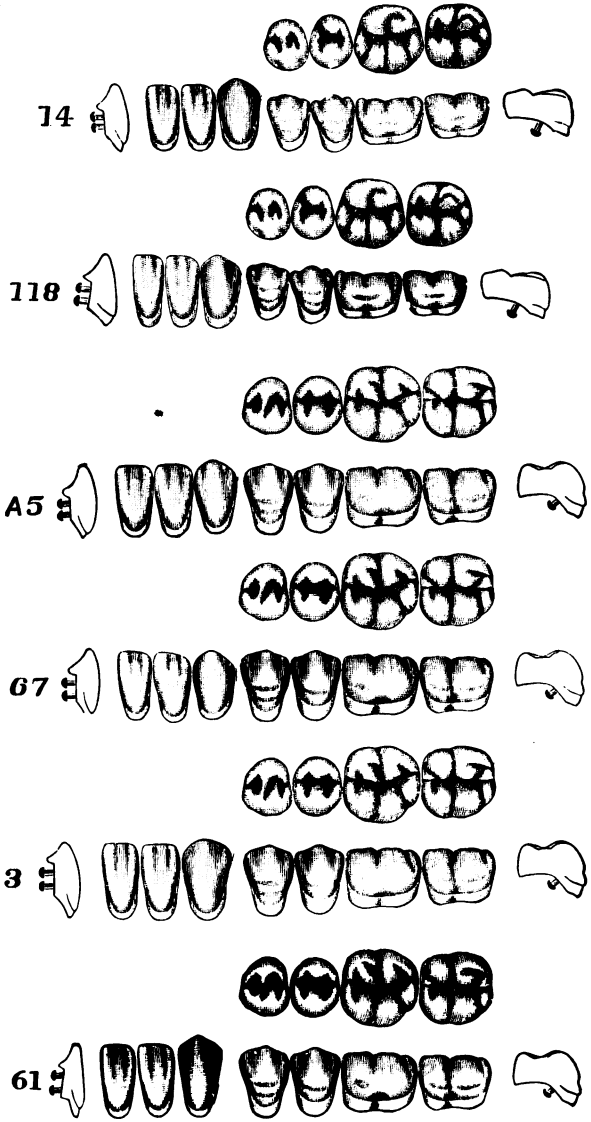
TWENTIETH CENTURY SOLILA TEETH

PLAIN VULCANITE LOWER MOULDS

REGULARLY COMPRISING ANATOMICAL BICUSPIDS AND MOLARS.

For dimensions of Lower Moulds illustrated here see Table No. 8 on page 56 in which the moulds are arranged in numerical order.



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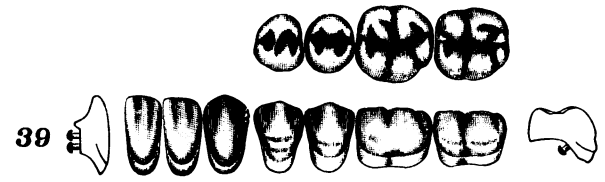

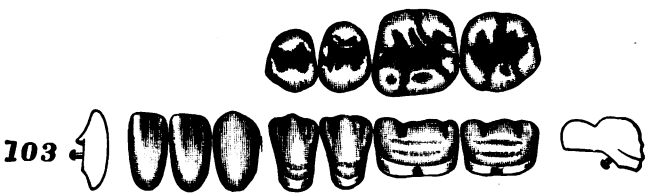

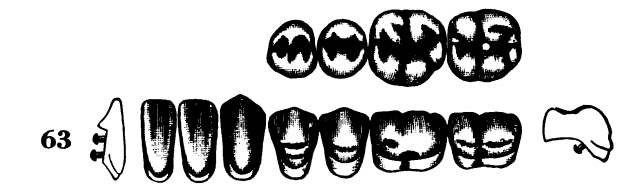

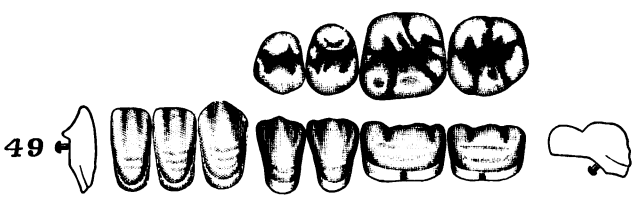

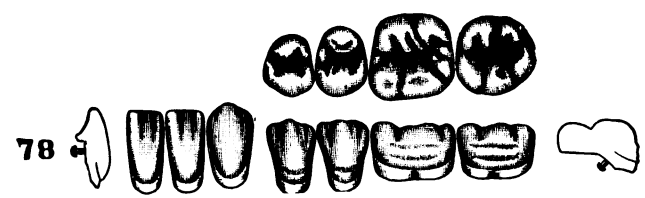

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Twentieth Century Solila Teeth

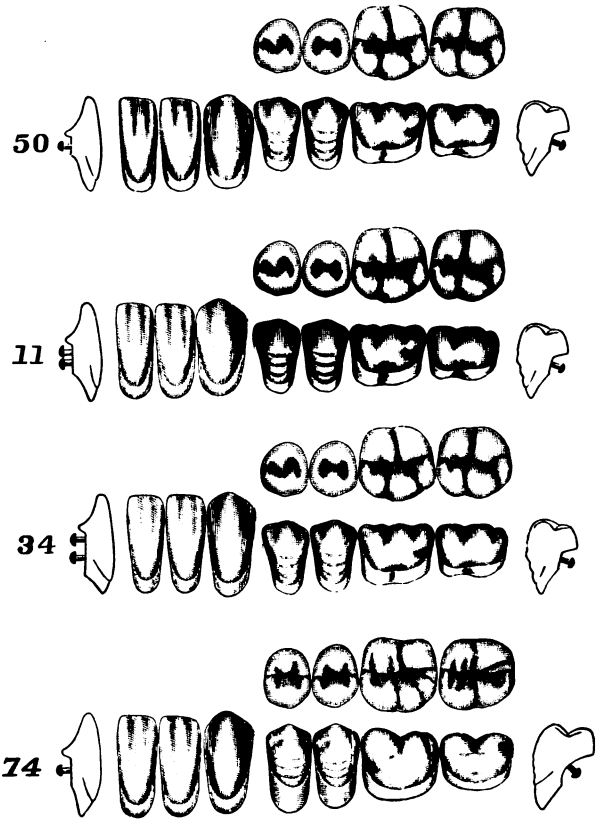

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TABLE No. 9

Lower Moulds Supplied in Sets of 6's Only

Mould No.	Length of Central	Width of Central	Bite of Central	Shut of Central	Ridge Lap	Combined Bite and Shut of Central
*52	8.25	4.75	2.	4.	2.	6.5
*27	8.75	5.25	2.5	3.	3.5	6.
70	9.	5.25	2.	2.5	4.5	5.
*10	9.75	5.	3.5	4.	2.5	8.
*19	10.5	6.25	3.5	3.5	3.5	7.5
*51	10.75	5.25	3.5	5.	2.5	9.
8	11.	5.	4.	4.5	2.5	9.
65	11.	5.5	2.5	3.5	5.	6.5
*87	11.	5.5	4.	4.5	2.5	9.
5	11.5	5.25	4.	4.	3.5	8.5
31	12.	4.5	3.	6.	3.	9.5
*25	12.5	4.25	3.5	5.	3.5	10.
*93	13.	5.5	4.	5.5	3.5	10.
A50	13.	5.5	5.	3.	5.	9.5
33	14.25	4.75	4.	7.5	3.	12.
13	14.25	5.25	4.	7.5	3.	12.
22	14.5	4.75	5.	4.5	5.	10.
60	16.25	5.5	5.5	5.5	5.	11.5
23	17.25	4.5	6.	5.5	5.5	12.

*These moulds, while not regularly carded with Anatomical Bicuspids and Molars, are obtainable in sets of 14's and 28's.

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51

8

65

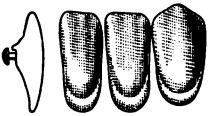
87

5

31

25

93

A50 

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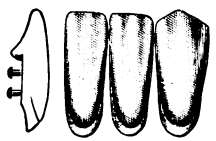
60 

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TABLE No. 10

Old Form Bicuspids and Molars—Lowers

Mould No.	Width one side	Length	Mould No.	Width one side	Length
A30	29.	Med. Long	13	30.5	Long
27	29.5	Short	74	31.	Long
24	30.	Short	5	32.5	Med. Long
65	30.	Med. Long	12	33.	Long
70	30.5	Short	93	34.	Long
11	30.5	Long			

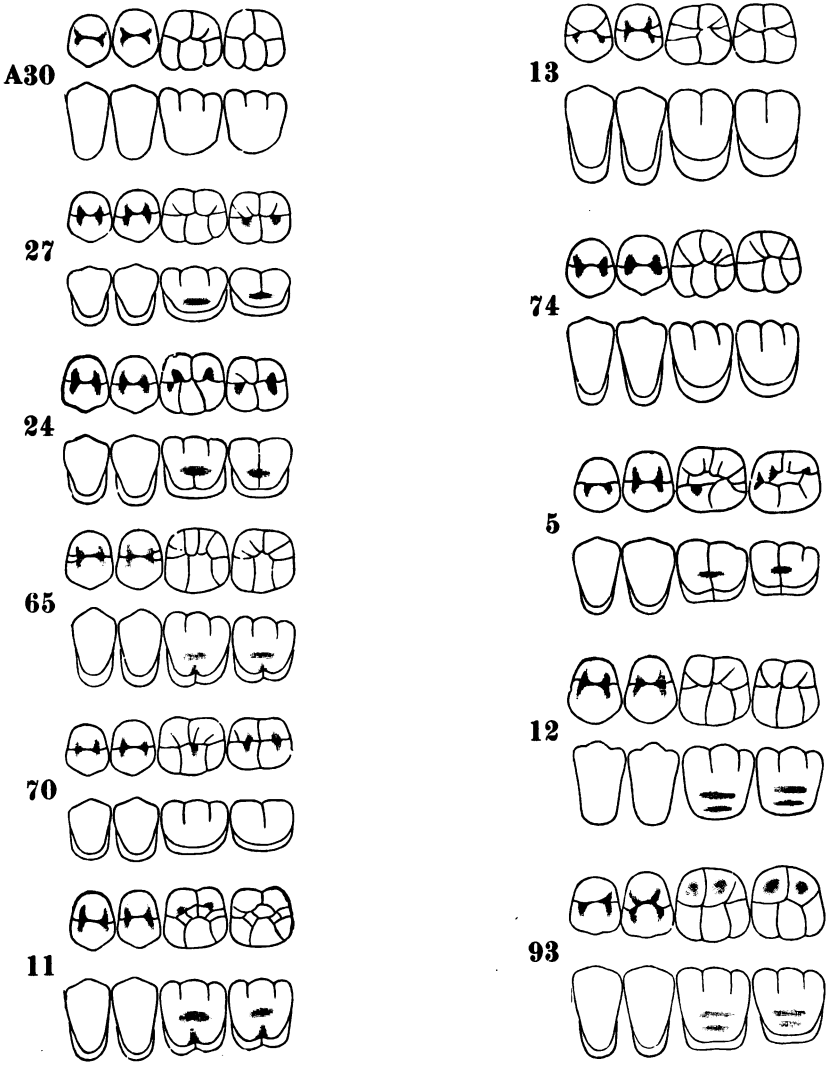

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TABLE NO. 11

Anatomical Bicuspids and Molars—Lowers

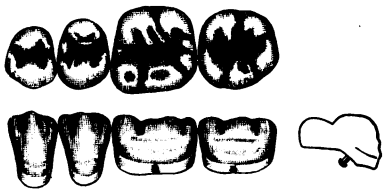
Mould No.	Width of Bicuspids and Molars one side	Length	Mould No.	Width of Bicuspids and Molars one side	Length
98	30.	Short	A50	34.	Long Bicuspids
97	31.5	Short			
55	32.	Short	A93	36.5	Long Bicuspids
99	34.	Medium			
100	36.5	Long			

98

99

97

100



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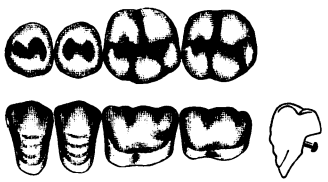
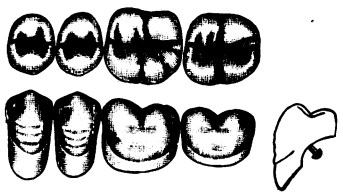
A50



A93



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